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PTO/SB/01 (C8-03)

Approved for use through 07/31/2006. OMB 0651-0032
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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**☐ Declaration
Submitted
With Initial
Filing

OR

☒ Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (a))
required)

Attorney Docket Number

H0004223

First Named Inventor

LavoZ

COMPLETE IF KNOWN

Application Number

10/528,643

Filing Date

9/18/02

Art. Unit

tbd

Examiner Name

tbd

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Variable Nozzle Device for a Turbocharger and Method for Operating the Same

(Title of the Invention)

the specification of which

☐ Is attached hereto

OR

☐ was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				Yes	No
PCT/IB02/03634	PCT	9/18/02	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto.

(Page 1 of 2)

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.83. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing this form, call 1-800-PTO-9199 and select option 2.

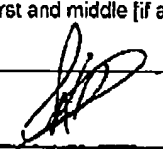

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PTO/SB/01 (08-03)

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number: <u>46507</u> OR <input type="checkbox"/> Correspondence address below			
Name John Christopher James			
Address Honeywell International Inc. 23326 Hawthorne Blvd # 200			
City Torrance		State CA	ZIP 90505
Country U.S.A.	Telephone (910) 791-7850	Fax (310) 791-7855	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) Alexis		Family Name or Surname Lavez	
Inventor's Signature 		Date May 9th, 2006	
Residence: City Thaon Les Vosges	State	Country France FRX	Citizenship French
Mailing Address BP 19 - ZI Route d' Oncourt F-88150, Thaon Les Vosges			
City	State	ZIP	Country
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) Alain		Family Name or Surname Lombard	
Inventor's Signature 		Date May 9th, 2006	
Residence: City Thaon Les Vosges	State	Country France FRX	Citizenship French
Mailing Address BP 19 - ZI Route d' Oncourt F-88150, Thaon Les Vosges			
City	State	ZIP	Country
<input type="checkbox"/> Additional inventors or a legal representative are being named on the _____; supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.			



PTO/SB/02A (03-03)

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DECLARATION**ADDITIONAL INVENTOR(S)**
Supplemental SheetPage 3 of 3

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Emmanuel		Severin	
Inventor's Signature 		Date May 9th, 2006	
Thaon Les Vosges	State	France FRX	French Citizenship
Residence: City			
BP 19 - ZI Route d' Oncourt F-88153, Thaon Les Vosges			
Mailing Address			
Mailing Address			
City	State	Zip	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Raphael		Heidinger	
Inventor's Signature 		Date May the 10th 2006	
Thaon Les Vosges	State	France FRX	French Citizenship
Residence: City			
BP 19 - ZI Route d' Oncourt F-88153, Thaon Les Vosges			
Mailing Address			
Mailing Address			
City	State	Zip	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	Zip	Country

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